Fill in this inf	ormation to identif	y your case and this filing:				
Debtor 1	Jose First Name	Ortiz Iiddle Name Last Name				
Debtor 2 (Spouse, if filing)	First Name M	fiddle Name Last Name				
United States Bar	nkruptcy Court for the: <u>V</u>	VESTERN DIST. OF WASHINGTON				
Case number (if known)	17-13890			if this is an ded filing		
Official Form						
Schedule A/	B: Property			12/15		
1. Do you own o	or have any legal or equo	ence, Building, Land, or Other Real Es		e an Interest In		
Yes. Where is the property? 1.1. Residence Street address, if available, or other description 11224 253rd PI		What is the property? Check all that apply. ☑ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative	Do not deduct secured claims or exemptions. F amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Propent Current value of the entire property? Current value of the portion you own?			
Kent	WA 98030	Manufactured or mobile home	\$390,716.00	\$390,716.00		
King County	State ZIP Code	Land Investment property Timeshare Other	Describe the nature of you interest (such as fee sim entireties, or a life estate	ple, tenancy by the		
Ex-Wife Natalie property to sepa	arate community 5/2016 via quit claim	te community 2016 via quit claim Vorce decree Check one. Debtor 1 only Debtor 2 only		Fee Simple Check if this is community property (see instructions)		
		□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	r			

Other information you wish to add about this item, such as local

property identification number: 202205931100

Debtor 1 Jose	Ortiz	Cas	se number (if known)17-1	3890				
1.2. Plot of Land - 1/4 Calle Fresno #3 Colonia La Estac La Barca Jalisco Mexico Land in Mexico	cion	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$10,000.00 Current value of the portion you own? \$10,000.00 Current value of the portion you own? \$10,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.					
County		Who has an interest in the property?	Fee Simple					
		Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is community property (see instructions)					
		Other information you wish to add about property identification number:	Other information you wish to add about this item, such as local property identification number:					
Part 2: Des Do you own, lease you own that some of the company of	ges you have attached fo scribe Your Vehicles e, or have legal or equitab	own for all of your entries from Part 1, inclured Part 1. Write that number here	registered or not? Include					
☐ No ☑ Yes 3.1.		Who has an interest in the property?	Do not deduct secured cla	ms or exemptions. Put the				
Make:	Chevy	Check one.	Do not deduct secured claims or exemptions. Put th amount of any secured claims on <i>Schedule D</i> :					
Model:	Pickup	Debtor 1 only Debtor 2 only	Creditors Who Have Claim Current value of the	Current value of the				
Year:	1998	Debtor 1 and Debtor 2 only	entire property?	portion you own?				
Approximate mileage Other information:	ge: <u>196,000</u>	At least one of the debtors and another	\$600.00	\$600.00				
	kup (approx. 196000	Check if this is community property (see instructions)						
Make: Ford F250 Model: Kingcab		Who has an interest in the property? Check one.	Do not deduct secured claimount of any secured claimount of the Creditors Who Have Claim					
		Debtor 1 only Debtor 2 only	Current value of the	Current value of the				
Year:	2005	Debtor 1 and Debtor 2 only	entire property?	portion you own?				
Approximate mileag	ge: 1 05,000	At least one of the debtors and another	\$8,000.00	\$8,000.00				
Other information: 2005 Ford F250 1 105000 miles)	Kingcab (approx.	Check if this is community property (see instructions)						

Debte	or 1 Jose Or	rtiz	Cas	se number (if known) 17-1	3890	
	el: : oximate mileage:	Ram Pickup 1997 185,000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property? \$1,500.00	ms on Schedule D:	
		approx. 185000	Check if this is community property (see instructions)			
3.4. Make: Chevy Model: Silverado Year: 2000 Approximate mileage: 160,000 Other information:		Silverado 2000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property? \$4,000.00	aims on Schedule D:	
2000 mile	-	ado (approx. 160000	(see instructions)			
Other 2005 1800 4.	el: coximate mileage: r information: Ford Flat Bed O miles) Watercraft, aircr Examples: Boats Mo Yes Add the dollar va	Truck (approx. aft, motor homes, ATV , trailers, motors, perso	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) s and other recreational vehicles, other vehicle watercraft, fishing vessels, snowmobiles, make the property of the part 2. Write that number here	notorcycle accessories uding any	ms on Schedule D:	
			or Part 2. Write that number here			
Do y			interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.	
	Examples: Major No	ls and furnishings appliances, furniture, li	nens, china, kitchenware ods and Services		\$1,500.00	
	•		o, video, stereo, and digital equipment; comput devices including cell phones, cameras, media	•		
	ш		cluding but not limited to 4 tvs, 2 laptop box, and 5 cell phones for the family	os, 1 desktop computer,	\$1,200.00	

Debt	or 1	Jose Ortiz Case number (if known	wn) 17-13890
		bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	;;
	□ No ☑ Yes.	. Describe 2 paintings	\$100.00
		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, canoes and kayaks; carpentry tools; musical instruments	skis;
	□ No ☑ Yes.	. Describe 1 work table, one work shed, baseball equipment	\$500.00
-		s es: Pistols, rifles, shotguns, ammunition, and related equipment	
	_	. Describe	
	Clothes Example ☐ No	es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
40	Yes.	. Describe Clothing and wearing apparel for debtor and three children	\$1,500.00
	,	es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch gold, silver	nes, gems,
	☐ No ☑ Yes.	. Describe various jewelry owned by children (\$200); 1 watch (\$250)	\$450.00
	Example	m animals es: Dogs, cats, birds, horses	
	☐ No ✓ Yes.	. Describe 3 dogs and 1 cat	\$0.00
	Any other	er personal and household items you did not already list, including any health aids you list	
	_	. Give specific rmation	
		dollar value of all of your entries from Part 3, including any entries for pages you have d for Part 3. Write the number here	\$5,250.00
Pa	rt 4:	Describe Your Financial Assets	
Do y	ou own	or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you fil petition	e your
	□ No ☑ Yes.	Cash:	\$1,000.00

Deb	tor 1	Jose Ortiz		Case number (if known)17-13890	
17.	-	brokerage	-	ther financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	
	□ No ✓ Yes	i		Institution name:	
	17	.1. Checkir	ng account:	Checking account - Personal Wells Fargo - Acct# xxxx5132	\$1,300.00
	17	.2. Savings	s account:	Checking Account - Personal Bank of America	\$200.00
18.	Exampl			traded stocks accounts with brokerage firms, money market accounts	
	✓ No ☐ Yes	S	Instituti	ion or issuer name:	
19.	-	-		erests in incorporated and unincorporated businesses, including b, and joint venture	
	info	s. Give specif rmation abou m	t	of entity: % of ownership:	
20.	Negotia	ble instrumer	nts include pers	s and other negotiable and non-negotiable instruments sonal checks, cashiers' checks, promissory notes, and money orders. se you cannot transfer to someone by signing or delivering them.	
	info	s. Give specif rmation abou m	t .	name:	
21.		es: Interests	on accounts in IRA, ERISA iring plans	, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or	
		s. List each ount separate	ely. Type of a	account: Institution name:	
22.	Your sh Exampl	are of all unu	nts with landlo	ou have made so that you may continue service or use from a company rds, prepaid rent, public utilities (electric, gas, water), telecommunications	
	✓ No			Institution name or individual:	
23.	Annuiti			c periodic payment of money to you, either for life or for a number of years)	
	✓ No ☐ Yes	.	Issuer	name and description:	
24.			ation IRA, in a 1), 529A(b), ar	an account in a qualified ABLE program, or under a qualified state tuition program. and 529(b)(1).	
	✓ No ☐ Yes	s	Instituti	ion name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)	
25.	Trusts,	equitable or		ets in property (other than anything listed in line 1), and rights or	
		s. Give specif			

Deb	tor 1	Jose Ortiz	Case number (if known)17	-13890
26.	Example No Yes	s, copyrights, trademarks, trade secrets, and other intellectual pes: Internet domain names, websites, proceeds from royalties and less. Give specific armation about them	• •	
27.	Exampl ✓ No	es, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association ho	oldings, liquor licenses, professional lic	enses
		s. Give specific rmation about them		
Mor	ney or pr	operty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	abo you	s. Give specific information out them, including whether already filed the returns	Fede State Loca	:
29.	Exampl	support es: Past due or lump sum alimony, spousal support, child support,	maintenance, divorce settlement, prop	erty settlement
	✓ No ☐ Yes	s. Give specific information	Alimony:	
	_		Maintenance:	
			Support:	
			Divorce settleme	ent:
			Property settlem	ent:
30.	Example ✓ No	mounts someone owes you es: Unpaid wages, disability insurance payments, disability benefits compensation, Social Security benefits; unpaid loans you made s. Give specific information		
31.		ts in insurance policies es: Health, disability, or life insurance; health savings account (HS/	A); credit, homeowner's, or renter's ins	urance
	con	s. Name the insurance npany of each policy I list its value	Beneficiary:	Surrender or refund value:
32.	If you a	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insura to receive property because someone has died	ance policy, or are currently	
	✓ No	s. Give specific information		
33.		against third parties, whether or not you have filed a lawsuit or es: Accidents, employment disputes, insurance claims, or rights to		
	✓ No	s. Describe each claim		

Deb	tor 1	Jose Ortiz Case number (if known) 17-13	890
34.	rights to	ontingent and unliquidated claims of every nature, including counterclaims of the debtor and o set off claims	
	✓ No ☐ Yes	Describe each claim	
35.	Any fina	ancial assets you did not already list	
	✓ No ☐ Yes	. Give specific information	
36.		dollar value of all of your entries from Part 4, including any entries for pages you have d for Part 4. Write that number here	\$2,500.00
P	art 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-related property?	
		Go to Part 6. Go to line 38.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accoun	ts receivable or commissions you already earned	
	✓ No ☐ Yes	Describe	
39.		quipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	✓ No ☐ Yes	. Describe	
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of your trade	
	□ No ▼ Yes	Describe Lawnmower, work tools, weedeaters, 2 tractors, shovel, etc and other landscaping equipment	\$10,000.00
41.	Invento	у	
	✓ No ☐ Yes	. Describe	
42.	Interest	s in partnerships or joint ventures	
	✓ No ☐ Yes	Describe Name of entity: % of ownership:	
43.		er lists, mailing lists, or other compilations	
	✓ No ☐ Yes	Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe	
44.	Any bus	siness-related property you did not already list	
	□ No ✓ Yes	. Give specific information.	
	AP	lus Landscape Services, LLC	\$10,000.00

Deb	tor 1	Jose Ortiz Case number (if known) _ 17-13	890
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here	\$20,000.00
Pa		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
		Go to Part 7. Go to line 47.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a Example	nimals es: Livestock, poultry, farm-raised fish	
	✓ No ☐ Yes	·	
48.	Crops-	either growing or harvested	
		s. Give specific rmation	
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No ☐ Yes	·	
50.	Farm a	nd fishing supplies, chemicals, and feed	
	✓ No	·	
51.	Any far	m- and commercial fishing-related property you did not already list	
	– . ,	s. Give specific rmation	
52.		e dollar value of all of your entries from Part 6, including any entries for pages you have d for Part 6. Write that number here	\$0.00
Pa	art 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	-	have other property of any kind you did not already list? es: Season tickets, country club membership	
	✓ No □ Yes	s. Give specific information.	
54.	Add the	e dollar value of all of your entries from Part 7. Write that number here →	\$0.00

Debtor 1 Jose Ortiz Case number (if known) 17-13890

List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2...... \$400,716.00 56. Part 2: Total vehicles, line 5 \$17,600.00 \$5,250.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 \$2,500.00 59. Part 5: Total business-related property, line 45 \$20,000.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal \$45,350.00 62. Total personal property. Add lines 56 through 61..... \$45,350.00 property total

\$446,066.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

Fill in this info	mation to ident	tify your o	case:				
Debtor 1	ose		Ortiz				
F Debtor 2	irst Name	Middle Name	Last Name				
(Spouse, if filing) F	irst Name	Middle Name	Last Name				
United States Bank	ruptcy Court for the:	WESTER	N DIST. OF WASH	ING	ON		Check if this is an
Case number <u>1</u> (if known)	7-13890						amended filing
Official Form 1	06C						
Schedule C:	The Property	You Cla	aim as Exemp	t			04/1
Using the property yo	ou listed on Schedul out and attach to this	<i>le A/B: Prope</i> s page as m	erty (Official Form 106	6A/B)	as your source, list th	e property t	for supplying correct information that you claim as exempt. If mor the top of any additional pages,
is to state a specific exempted up to the receive certain bene exemption of 100% property is determin	dollar amount as on amount of any appure of the desired amount of any appure of fair market value and to exceed that a second and the desired amount of th	exempt. Alt licable state pt retiremen e under a la amount, you	ternatively, you may utory limit. Some ex nt fundsmay be unli w that limits the exe ur exemption would	clair emp imite mpti	n the full fair market tionssuch as those d in dollar amount. I	value of the for health However, if lar amount	aids, rights to you claim an and the value of the
Part 1: Ident	tify the Property	y You Cla	im as Exempt				
1. Which set of ex	emptions are you	claiming?	Check one only, e	even	if your spouse is filing	with you.	
<u> </u>	iming state and fede iming federal exem		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)		
2. For any proper	ty you list on Sche	dule A/B tha	at you claim as exen	npt, f	ill in the information	below.	
Brief description of Schedule A/B that li		ne on	Current value of the portion you own		ount of the mption you claim	Specific	laws that allow exemption
			Copy the value from Schedule A/B		ck only one box for h exemption		
Brief description:			\$390,716.00	П		Wash. I	Rev. Code. § 6.13.030
Residence Ex-Wife Natalie O separate commur 12/05/2016 via qui divorce decree Parcel: 20220593'	ity propety on t claim deed as p		, , , , , , , , , , , , , , , , , , ,		100% of fair market value, up to any applicable statutory limit		•
Line from Schedule A	V/B: 1.1						
Brief description: 2005 Ford F250 Ki miles) Line from Schedule A		105000	\$8,000.00		\$3,250.00 100% of fair market value, up to any applicable statutory limit	Wash. I (iii)	Rev. Code. § 6.15.010(1)(c)
(Subject to adjust No	stment on 4/01/19 a	nd every 3 y	more than \$160,3753 ears after that for cas	es fil	ed on or after the date		·

Official Form 106C

Part 2: Additional Page					
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B		eck only one box for h exemption		
Brief description: Household Goods and Services	\$1,500.00		\$1,500.00 100% of fair market	Wash. Rev. Code. § 6.15.010(1)(c)(i)	
Line from Schedule A/B:6			value, up to any applicable statutory limit		
Brief description: Electronics, including but not limited to 4 tvs, 2 laptops, 1 desktop computer, 1 xbox, 1 apple box, and 5 cell phones for the family Line from Schedule A/B:	\$1,200.00		\$1,200.00 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(c)(i)	
Brief description:	\$100.00	V	\$100.00	Wash. Rev. Code. § 6.15.010(1)(c)	
2 paintings Line from Schedule A/B: 8			100% of fair market value, up to any applicable statutory limit	(ii)	
Brief description: 1 work table, one work shed, baseball	\$500.00	Ø	\$500.00 100% of fair market	Wash. Rev. Code. § 6.15.010(1)(c)(i)	
equipment Line from Schedule A/B: 9			value, up to any applicable statutory limit		
Brief description:	\$1,500.00	Ø	\$1,500.00	Wash. Rev. Code. § 6.15.010(1)(a)	
Clothing and wearing apparel for debtor and three children Line from Schedule A/B:11			100% of fair market value, up to any applicable statutory limit		
Brief description: various jewelry owned by children (\$200);	\$450.00	Ø	\$450.00 100% of fair market	Wash. Rev. Code. § 6.15.010(1)(a)	
1 watch (\$250) Line from <i>Schedule A/B:</i> 12			value, up to any applicable statutory limit		
Brief description:	\$1,000.00	Ø	\$1,000.00	Wash. Rev. Code. § 6.15.010(1)(c)	
Cash on Hand Line from Schedule A/B:16			100% of fair market value, up to any applicable statutory limit	(ii)	
Brief description: Checking account - Personal	\$1,300.00	Ø	\$1,300.00 100% of fair market	Wash. Rev. Code. § 6.15.010(1)(c) (ii)	
Wells Fargo - Acct# xxxx5132 Line from Schedule A/B:			value, up to any applicable statutory limit	(II)	
Brief description: Lawnmower, work tools, weedeaters, 2	\$10,000.00	<u> </u>	\$10,000.00 100% of fair market	Wash. Rev. Code. § 6.15.010(1)(d) (iii)	
tractors, shovel, etc and other landscaping equipment Line from Schedule A/B: 40			value, up to any applicable statutory limit	\ /	

Official Form 106C

Fill in this info	ormation to ident	tify your case:					
Debtor 1	Jose	ACT III AL	Ortiz				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Ban	nkruptcy Court for the:	WESTERN DIST	Γ. OF WASHINGTO	ON			
Case number	17-13890				_		
(if known)					Ц	Check if this is amended filing	
Official Form	106D						
Schedule D:	Creditors Wh	o Have Claii	ms Secured b	v Property			12/15
1. Do any credite No. Chec Yes. Fill Part 1: List 2. List all secure claim, list the correditor has a	ors have claims sectors this box and submitting all of the information at All Secured Classed claims. If a creditor separately for particular claim, list the ble, list the claims in a sec.	ured by your propert this form to the combelow. ims or has more than one each claim. If more ther creditors in	erty? urt with your other so ne secured e than one Part 2. As	·	Columnaim Value of the that su		Column C Unsecured portion If any
2.1		Describe the p		\$173,22	9.00 \$	390,716.00	
Ditech Creditor's name Attn: Bankruptcy Number Street PO Box 6172		Residence As of the date Contingent	you file, the claim i	s: Check all that a	apply.		
Rapid City SD 57709 State ZIP Code Disputed Who owes the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Unliquidated Disputed Nature of lien. Check all that apply. ✓ An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit ✓ Other (including a right to offset) Conventional Real Estate Mortgage							

Add the dollar value of your entries in Column A on this page. Write that number here:

\$173.229.00

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property

page 1

Debtor 1 Jose Ortiz Case number (if known) 17-13890 Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them Do not deduct the that supports this portion sequentially from the previous page. value of collateral If any Describe the property that 2.2 \$20,849.00 \$390,716.00 \$20,849.00 secures the claim: **IRS IRS Tax Lien** Creditor's name **Centralized Insolvency Operation** PO Box 7346 As of the date you file, the claim is: Check all that apply. ☐ Contingent 19101-7346 Philadelphia PA Unliquidated ZIP Code Disputed П Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only П Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ◩ 1040 Taxes Check if this claim relates to a community debt Date debt was incurred 1/27/2017 Last 4 digits of account number Recording # 2014012700183 Debtor intends to File an adversary to value the IRS Tax Liens under 11 USC 506 to find them unsecured. Describe the property that 2.3 \$27,659.00 \$390,716.00 \$27,659.00 secures the claim: **IRS** Residence Creditor's name **Centralized Insolvency Operation** PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Philadelphia 19101-7346 Unliquidated ZIP Code Disputed П Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) $\sqrt{}$ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another П Other (including a right to offset) 1040 Taxes Check if this claim relates to a community debt Date debt was incurred 2/6/2009 Last 4 digits of account number Recording# 20090206001518 Debtor intends to File an adversary to value the IRS Tax Liens under 11 USC 506 to find them unsecured.

Add the dollar value of your entries in Column A on this page. Write that number here:

\$48,508.00

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property page 2 Pg. 13 of 56 Case 17-13890-CMA Doc 9 Filed 09/18/17 Ent. 09/18/17 19:20:54

Debtor 1 Jose Ortiz Case number (if known) 17-13890 Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them Do not deduct the that supports this portion sequentially from the previous page. value of collateral If any Describe the property that 2.4 \$41,011.00 \$390,716.00 \$41,011.00 secures the claim: **IRS** Residence Creditor's name **Centralized Insolvency Operation** PO Box 7346 As of the date you file, the claim is: Check all that apply. ☐ Contingent 19101-7346 Philadelphia PA Unliquidated ZIP Code Disputed П Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only П Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ◩ 1040 Taxes Check if this claim relates to a community debt Date debt was incurred 8/25/2010 Last 4 digits of account number Instrument# 20100825000123 Debtor intends to File an adversary to value the IRS Tax Liens under 11 USC 506 to find them unsecured. Describe the property that 2.5 \$390,716.00 Unknown Unknown secures the claim: **IRS** Residence Creditor's name **Centralized Insolvency Operation** PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Philadelphia 19101-7346 Unliquidated ZIP Code Disputed П Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) \mathbf{Q} Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another П Other (including a right to offset) 1040 Taxes Check if this claim relates to a community debt Date debt was incurred 01/21/2014 Last 4 digits of account number UCC Lien filing - Recording # 201402170104 Debtor intends to File an adversary to value the IRS Tax Liens under 11 USC 506 to find them unsecured.

Add the dollar value of your entries in Column A on this page. Write that number here:

\$41,011.00

Official Form 106D page 3 Pg. 14 of 56 Case 17-13890-CMA Doc 9 Filed 09/18/17 Ent. 09/18/17 19:20:54

Debtor 1 Jose Ortiz Case number (if known) 17-13890 Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them Do not deduct the that supports this portion sequentially from the previous page. value of collateral If any Describe the property that 2.6 \$30,952.00 \$390,716.00 \$30,952.00 secures the claim: **IRS** Residence Creditor's name **Centralized Insolvency Operation** PO Box 7346 As of the date you file, the claim is: Check all that apply. ☐ Contingent 19101-7346 Philadelphia PA Unliquidated ZIP Code Disputed П Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only П Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ◩ 1040 Taxes Check if this claim relates to a community debt Date debt was incurred 3/22/2013 Last 4 digits of account number Recording# 20130322001738 Debtor intends to File an adversary to value the IRS Tax Liens under 11 USC 506 to find them unsecured. Describe the property that 2.7 \$14,761.00 \$390,716.00 \$14,761.00 secures the claim: **IRS** Residence Creditor's name **Centralized Insolvency Operation** PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Philadelphia 19101-7346 Unliquidated ZIP Code Disputed П Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) $\sqrt{}$ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another П Other (including a right to offset) 1040 Taxes Check if this claim relates to a community debt Date debt was incurred 8/22/2011 Last 4 digits of account number Instrument# 20010822000607 Debtor intends to File an adversary to value the IRS Tax Liens under 11 USC 506 to find them unsecured.

Add the dollar value of your entries in Column A on this page. Write that number here:

\$45,713.00

page 4

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property Pg. 15 of 56 Case 17-13890-CMA Doc 9 Filed 09/18/17 Ent. 09/18/17 19:20:54

Debtor 1 Jose Ortiz Case number (if known) 17-13890 Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them Do not deduct the that supports this portion sequentially from the previous page. value of collateral If any Describe the property that 2.8 \$230,000.00 \$390,716.00 \$12,513.00 secures the claim: Ocwen Loan Servicing, LLC Residence Creditor's name Attn: Research/Bankruptcy 1661 Worthington Rd Ste 100 As of the date you file, the claim is: Check all that apply. ☐ Contingent West Palm Bch 33409 Unliquidated ZIP Code Disputed П Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only ✓ An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) $\overline{\mathbf{Q}}$ Real Estate Mortgage without Other Collateral Check if this claim relates to a community debt

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$230,000.00

4 5 8 3

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$538,461.00

Date debt was incurred

06/2007

Debtor 1	Jose Ortiz			Case number (if known)	17-13890

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	e additional creditors here. It you do n t this page.	ot have a	additional perso	ns to be notified for any debts in Part 1, do not fill out or	
1	McCarthy Holthus			On which line in Part 1 did you enter the creditor?	2.1
	Name Attn: Adrian Burlaza			Last 4 digits of account number	_
	Number Street 108 1st Ave S, Ste 300			<u> </u>	
	Seattle	WA	98104		
	City	State	ZIP Code		
2	Northwest Cascade Trustee Serv	vices		On which line in Part 1 did you enter the creditor?	2.8
	Name 901 Fifth Ave, Ste 410			Last 4 digits of account number	_
	Number Street			<u> </u>	
	Seattle	WA	98164		
	City	State	ZIP Code		
3	United State's Attorney's Office			On which line in Part 1 did you enter the creditor?	2.2
	Name Attn: Bankruptcy Assistant			Last 4 digits of account number	_
	Number Street U.S. Courthouse				_
	700 Stewart St, Rm 5220			_	
	Seattle	WA	98101		
	City	State	ZIP Code		

Official Form 106D

					_			
Fill in this inf	formation to i	dentify your c	ase	:				
Debtor 1	Jose			Ortiz				
Debior 1	First Name	Middle Name		Last Name	•			
Debtor 2								
(Spouse, if filing)	First Name	Middle Name		Last Name	•			
United States Ba	ankruntov Court fo	or the: WESTERN	אם א	ST. OF WASHINGTON				
		or the. WESTERN	1 DI	DI. OF WASHINGTON	•			
Case number (if known)	17-13890						Check if this is a	an
(ii kiiowii)							amended filing	
Official Form	106E/F							
Schedule E	/F: Credito	rs Who Have	e U	nsecured Claims				12/15
If more space is r to this page. On	needed, copy the the top of any ac	Part you need, fi	ill it (vrite	ms that are listed in Schedul out, number the entries in the your name and case number ured Claims	bo)	ces on the left. At		
1. Do any credi	tors have priorit	y unsecured clair	ms a	gainst you?				
-	to Part 2.	•						
✓ Yes.								
claim. For ea show both pri more space is claim, list the	ach claim listed, ic ority and nonprio s needed for prior other creditors in	dentify what type of rity amounts. As m rity unsecured clain Part 3.	f clai nuch ms, f	itor has more than one priority m it is. If a claim has both prio as possible, list the claims in a ill out the Continuation Page of tructions for this form in the ins	rity a alpha Par	and nonpriority amo abetical order accor t 1. If more than or	ounts, list that clain ding to the creditor	m here and or's name. If
						Total claim	Priority	Nonpriority
							amount	amount
2.1						\$18,000.00	\$18,000.00	\$0.00
Department of L Priority Creditor's Nam		ries	- Las	st 4 digits of account number				
Collections			. Wh	en was the debt incurred?	12			
Number Street PO Box 44171					_		-	
. • Dox			- AS	of the date you file, the claim Contingent	ı is:	Check all that app	y.	
Olympia	\A/A	00504 4474	╌片	Unliquidated				
Olympia City	WA State	98504-4171 ZIP Code	- 🗖	Disputed				
Who incurred the	debt? Check	one.	Туј	oe of PRIORITY unsecured cl	aim:	:		
Debtor 1 only				Domestic support obligations				
Debtor 2 only Debtor 1 and I	Debtor 2 only		Ø	Taxes and certain other debts Claims for death or personal i			ent	
At least one of	f the debtors and		Ш	intoxicated	.,)	, , 500 11010		
ш	claim is for a co	mmunity debt		Other. Specify				
Is the claim subje	ect to offset?							
✓ No Yes								

Official Form 106E/F

Debtor 1 Jose Ortiz Case number (if known) 17-13890 Your PRIORITY Unsecured Claims -- Continuation Page Part 1: After listing any entries on this page, number them sequentially from the Total claim **Priority** Nonpriority previous page. amount amount 2.2 \$30,000.00 \$30,000.00 \$0.00 **Dept of Labor and Industries** Last 4 digits of account number Priority Creditor's Name Collections When was the debt incurred? 12/31/2015 Number PO Box 44171 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated WA 98504 Olympia Disputed City ZIP Code State Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ✓ No Yes Yes \$16.000.00 \$16,000.00 \$0.00 **Employment Security Department** Last 4 digits of account number Priority Creditor's Name **UI Tax Admin** When was the debt incurred? Number Street PO Box 9046 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated WA 98507-9046 Olympia Disputed City ZIP Code Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated Check if this claim is for a community debt П Other. Specify Is the claim subject to offset? \square Yes 2.4 \$8,000.00 \$8,000.00 \$0.00 **IRS** Last 4 digits of account number Priority Creditor's Name Centralized Insolvency Operation When was the debt incurred? 12/31/2016 Number PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **Philadelphia** 19101-7346 PA Disputed ZIP Code Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated

Yes

☐ Check if this claim is for a community debt

Is the claim subject to offset?

No

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Specify

Debtor 1 Jose Ortiz		Case number (if known)	17-13890						
Part 1: Your PRIORITY Unsecure	ed Claims Continuation Page								
After listing any entries on this page, number previous page.	them sequentially from the	Total claim	Priority amount	Nonpriority amount					
2.5 IRS		\$26,000.00	\$26,000.00	\$0.00					
Priority Creditor's Name	Last 4 digits of account number								
Centralized Insolvency Operation Number Street	When was the debt incurred?	12/31/2015							
PO Box 7346	As of the date you file, the clain	is: Check all that appl	y.						
	Contingent								
Philadelphia PA 19101-73	Unliquidated Disputed								
City State ZIP Code	<u></u> .								
Who incurred the debt? Check one. Debtor 1 only	• •	Type of PRIORITY unsecured claim:							
Debtor 1 only Debtor 2 only	☐ Domestic support obligations☐ Taxes and certain other debts	s vou owe the governme	ent						
Debtor 1 and Debtor 2 only		Claims for death or personal injury while you were intoxicated							
At least one of the debtors and another									
Check if this claim is for a community de ls the claim subject to offset?	other. Specify								
No									
Yes									
2.6		\$50,000.00	\$50,000.00	\$0.00					
WA Department of Revenue	Local Adjuste of account number								
Priority Creditor's Name Attn: Susan Roland	Last 4 digits of account number								
Number Street	When was the debt incurred?								
2101 4th Ave, Ste 1400	As of the date you file, the clain	is: Check all that appl	y.						
	Contingent								
Seattle WA 98121 City State ZIP Code	Unliquidated Disputed								
Who incurred the debt? Check one.	Type of PRIORITY unsecured cl	aim:							
Debtor 1 only Debtor 2 only	Domestic support obligations								
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts	,	ent						
At least one of the debtors and another	Claims for death or personal intoxicated	injury writte you were							

Official Form 106E/F

Check if this claim is for a community debt

Is the claim subject to offset?

✓ No ☐ Yes

Other. Specify

Debtor 1 Jose Ortiz	Case number (if known)
Part 2: List All of Your NONPRIORITY	Y Unsecured Claims
3. Do any creditors have nonpriority unsecured	claims against you?
No. You have nothing to report in this part.✓ Yes	Submit this form to the court with your other schedules.
If a creditor has more than one nonpriority unsective of claim it is. Do not list claims already include:	in the alphabetical order of the creditor who holds each claim. sured claim, list the creditor separately for each claim. For each claim listed, identify what suded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
	Total claim
4.1	\$1,395.00
Bank Of America Nonpriority Creditor's Name NC4-105-03-14 Number Street PO Box 26012 Greensboro NC 27410 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? NO Yes	Last 4 digits of account number 2 4 6 5 When was the debt incurred? 06/2003 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card
Capital One Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 30253	\$2,351.00 Last 4 digits of account number 5 6 1 3 When was the debt incurred? 11/2005 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
Salt Lake City State State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card

Capitla One Bank v. Jose R Ortiz, Case# 13-2-23006-2 KNT, King Count Superior Court, Judgment Entered 12-6-2016

Official Form 106E/F

Debtor 1 Jose Ortiz	Case number (if known) 17-13890	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	n sequentially from the	Total claim
4.3		\$13,902.00
Discover Financial	Last 4 digits of account number 2 1 0 6	
Nonpriority Creditor's Name	When was the debt incurred? 05/2003	
PO Box 3025 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
New Albany OH 43054	Disputed	
New Albany OH 43054 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
☐ Yes		
4.4		\$17,005.00
Midland Funding	Last 4 digits of account number 3 8 2 2	· · · · · · · · · · · · · · · · · · ·
Nonpriority Creditor's Name	When was the debt incurred? 07/2013	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 939069	_ ☐ Contingent	
	Unliquidated	
	Disputed	
San Diego CA 92193 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations original and a consequence of a discourse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Factoring Company Account	
Is the claim subject to offset?		

Official Form 106E/F

✓ No ☐ Yes

Originally with Citibank, NA

Judgment Entered

Debtor 1 Jose Ortiz	Case number (if known)17-13890	
Part 2: Your NONPRIORITY Uns	secured Claims Continuation Page	
After listing any entries on this page, number previous page.	r them sequentially from the	Total claim
4.5		\$6,526.12
Pacific Topsoils, Inc	Last 4 digits of account number	
Nonpriority Creditor's Name c/o Registered Agent	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
SANDRA FORMAN	Contingent	
805 80th St SW	Unliquidated Disputed	
Everett City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community delis the claim subject to offset? No Yes Pacific Topsoil, Inc v Jose Ramon ortiz	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Business debt and Natalie R. Ortiz, Case# 17-2-02575-31	
4.6 Salal Credit Union	Last 4 digits of account number 0 0 0 1	\$13,515.00
Nonpriority Creditor's Name	When was the debt incurred? 08/22/2001	
P O Box 19340 Number Street	As of the date you file, the claim is: Check all that apply.	
	Unliquidated Disputed □ Disputed	
Seattle WA 98109 City State ZIP Code		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	

Other. Specify
Check Credit or Line of Credit

Official Form 106E/F

☐ Check if this claim is for a community debt

Is the claim subject to offset?

✓ No ☐ Yes

Debtor 1	Jose Ortiz	Case number (if known) 17-13890
DCDIOI I	JUSE OI LIZ	Case number (if known) 17-13090

List Others to Be Notified About a Debt That You Already Listed Part 3:

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Attorney General for the State of WA			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name Bankruptcy and Col	llection Uni	it	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street 800 Fifth Ave			Part 2: Creditors with Nonpriority Unsecured Claims				
Suite 2000			—— Last 4 digits of account number				
Seattle	WA	98104					
City	State	ZIP Code					
Citibank, NA			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name Attn: Centralized Ba	ankruptcy		Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street POB 20507			Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number				
Kansas City City	MO State	64195 ZIP Code	<u></u>				
Oity	State	Zii Code					
Fax Duncan			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 1416 E Thomas			Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
			—— Last 4 digits of account number				
Seattle	WA	98112	<u> </u>				
City	State	ZIP Code					
Suttell & Hammer, F	P.S.		On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			Line 4.2 of /Cheek analy - Rout 4. Creditors with Priority Unacquired Claims				
PO Box C-90006 Number Street			Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
			Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number				
Bellevue	WA	98009 ZIP Code					
City	State	ZIP Code					

Official Form 106E/F

Debtor 1 Jose Ortiz Case number (if known) 17-13890

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$148,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$148,000.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. ⊣	\$54,694.12
	6j.	Total. Add lines 6f through 6i.	6j.	\$54,694.12

Official Form 106E/F

Fill in this inf	ormation to id	entify your case	:
Debtor 1	Jose First Name	Middle Name	Ortiz Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court for	the: WESTERN DIS	ST. OF WASHINGTON
Case number (if known)	17-13890		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Official Form 106G

Debtor 1	Jose		Ortiz		
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse, if filing)	First Name	Middle Name	Last Name		
Inited States Ba	nkruptcy Court fo	or the: WESTERN DI	ST. OF WASHINGTO	<u>N</u>	
Case number	17-13890			☐ Check if this is an	
f known)				amended filing	
fficial Form	106H				
		.1.4			
chedule H	Your Cod	ebtors			1
	·			(if known). Answer every question.	
Do you have	any codebtors?	(If you are filing a jo	oint case, do not list eithe	er spouse as a codebtor.)	
□ No					
✓ Yes					
				territory? (Community property states and territories ico, Texas, Washington, and Wisconsin.)	
☐ No. Go t					
		rmer snouse, or legal e		at the time?	
<u> </u>	i your spouse, ioi	inici spouse, or legal e	equivalent live with you a	at the time:	
☑ No		mor opodoc, or logar c	equivalent live with you a	at the time:	
✓ No ☐ Yes					
✓ No ☐ Yes In Column 1,	list all of your c	odebtors. Do not inc	lude your spouse as a	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the	
No Yes In Column 1, person show creditor on S	list all of your c n in line 2 again Chedule D (Offic	odebtors. Do not inc as a codebtor only it cial Form 106D), Sche	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the	
No Yes In Column 1, person show creditor on S	list all of your c n in line 2 again Chedule D (Offic	odebtors. Do not inc	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the	
✓ No	list all of your c n in line 2 again Chedule D (Offic	odebtors. Do not inc as a codebtor only it cial Form 106D), Sche	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the	ne d
✓ No	list all of your c n in line 2 again Schedule D (Offic Schedule E/F, of	odebtors. Do not inc as a codebtor only it cial Form 106D), Sche	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use	ne d
✓ No	list all of your c n in line 2 again Schedule D (Offic Schedule E/F, of Your codebtor	odebtors. Do not inc as a codebtor only it cial Form 106D), Sche	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the n 106E/F), or <i>Schedule G</i> (Official Form 106G). Use	ne d
No Yes In Column 1, person show creditor on S Schedule D, S Column 1:	list all of your c n in line 2 again Schedule D (Offic Schedule E/F, of Your codebtor	odebtors. Do not inc as a codebtor only it cial Form 106D), Sche	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use	ne d
✓ No	list all of your c n in line 2 again Schedule D (Offic Schedule E/F, or Your codebtor	odebtors. Do not inc as a codebtor only it cial Form 106D), Sche	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line	ne d
✓ No	list all of your c n in line 2 again Schedule D (Offic Schedule E/F, or Your codebtor	odebtors. Do not inc as a codebtor only it cial Form 106D), Sche	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line 4.1	ne d
No Yes In Column 1, person show creditor on S Schedule D, Column 1: Natalie O Name 23927 S 6	list all of your con in line 2 again schedule D (Offic Schedule E/F, or Your codebtor or other both Ave	odebtors. Do not inc as a codebtor only it cial Form 106D), Sche	lude your spouse as a that person is a guara edule E/F (Official Forn	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	ne de
No Yes In Column 1, person show creditor on S Schedule D, Column 1: Natalie O Name 23927 S O Number Kent	list all of your con in line 2 again schedule D (Offic Schedule E/F, or Your codebtor or other both Ave	odebtors. Do not inc as a codebtor only if cial Form 106D), Sche r Schedule G to fill on	lude your spouse as a fithat person is a guara edule E/F (Official Formut Column 2.	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line 4.1	ne do
No Yes In Column 1, person show creditor on S Schedule D, Column 1: Natalie O Name 23927 S (Number	list all of your con in line 2 again schedule D (Offic Schedule E/F, or Your codebtor or other both Ave	odebtors. Do not inc as a codebtor only if cial Form 106D), Sche r Schedule G to fill on	lude your spouse as a f that person is a guara edule E/F (Official Forn ut Column 2.	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	ne do
No Yes In Column 1, person show creditor on S Schedule D, Column 1: Natalie O Name 23927 S O Number Kent City	list all of your c n in line 2 again Schedule D (Offic Schedule E/F, of Your codebtor Ortiz 60th Ave	odebtors. Do not inc as a codebtor only if cial Form 106D), Sche r Schedule G to fill on	lude your spouse as a fithat person is a guara edule E/F (Official Formut Column 2.	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Bank Of America	ne d
No Yes In Column 1, person show creditor on S Schedule D, S Column 1: Natalie O Name Z3927 S 0 Number Kent City Natalie O Name	list all of your c n in line 2 again Schedule D (Offic Schedule E/F, of Your codebtor Ortiz 60th Ave Street	odebtors. Do not inc as a codebtor only if cial Form 106D), Sche r Schedule G to fill on	lude your spouse as a fithat person is a guara edule E/F (Official Formut Column 2.	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	ne d
In Column 1, person show creditor on S Schedule D, S Column 1: Natalie O Name 23927 S O Number Kent City Natalie O Natalie O Name	list all of your c n in line 2 again Schedule D (Offic Schedule E/F, or Your codebtor Ortiz Street Ortiz Ortiz Ortiz	odebtors. Do not inc as a codebtor only if cial Form 106D), Sche r Schedule G to fill on	lude your spouse as a fithat person is a guara edule E/F (Official Formut Column 2.	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Bank Of America	ne d
No Yes In Column 1, person show creditor on S Schedule D, S Column 1: Natalie O Name 23927 S (Number Vent City Natalie O Name 23927 S (Name 23927 S (list all of your c n in line 2 again Schedule D (Offic Schedule E/F, of Your codebtor Ortiz 60th Ave Street	odebtors. Do not inc as a codebtor only if cial Form 106D), Sche r Schedule G to fill on	lude your spouse as a fithat person is a guara edule E/F (Official Formut Column 2.	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Bank Of America Schedule D, line Bank Of America	ne d
No Yes In Column 1, person show creditor on S Schedule D, S Column 1: Natalie O Name 23927 S (Number Vent City Natalie O Name 23927 S (Name 23927 S (list all of your c n in line 2 again Schedule D (Offic Schedule E/F, of Your codebtor Ortiz Street	odebtors. Do not inc as a codebtor only if cial Form 106D), Sche r Schedule G to fill on	lude your spouse as a fithat person is a guara edule E/F (Official Formut Column 2.	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or Schedule G (Official Form 106G). Use Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line 4.1 Schedule G, line Bank Of America Schedule D, line Schedule D, line Bank Of America	ne d

Official Form 106H Schedule H: Your Codebtors page 1

Debtor 1 Jose Ortiz Case number (if known) 17-13890 **Additional Page to List More Codebtors**

	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.3	Natalie Ortiz Name 23927 S 60th Ave Number Street			Schedule D, line Schedule E/F, line4.3
	Kent City	WA State	98030 ZIP Code	Schedule G, line Discover Financial
3.4	Natalie Ortiz Name 23927 S 60th Ave Number Street			Schedule D, line Schedule E/F, line 4.4
	Kent City	WA State	98030 ZIP Code	Schedule G, line Midland Funding
3.5	Natalie Ortiz Name 23927 S 60th Ave			Schedule D, line
	Number Street			Schedule E/F, line 4.6 Schedule G, line
	Kent City	WA State	98030 ZIP Code	Salal Credit Union

Fill in this infor	nation to ident	ify your case:				
	_	iry your oasc.	Ortiz			
Debtor 1	Jose First Name	Middle Name	Last Name		 Che	ck if this is:
Debtor 2					_	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name			· ·
United States Bank	cruptcy Court for the	e: WESTERN D	DIST. OF WASHI	NGTON	□	A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)	17-13890			_		
,	061					MM / DD / YYYY
Official Form 1						
Schedule I: Yo	our income					12/15
include information a about your spouse. I your name and case	bout your spouse f more space is no	. If you are separ eeded, attach a so). Answer every o	rated and your spo eparate sheet to th	use is no	filing with y	spouse is living with you, ou, do not include information any additional pages, write
Fill in your empl information.	oyment		Debtor 1			Debter 2 or non filing enouge
If you have more		_				Debtor 2 or non-filing spouse
job, attach a sepa with information a	i ato pago	loyment status	☐ Employed✓ Not employed	2d		☐ Employed☐ Not employed
additional employ	ers.	upation	Self Employed			
Include part-time,		ирацоп	Sell Elliployed	<u> </u>		
or self-employed		loyer's name	Aplus Landsca	aping Ser	vices, LLC	
Occupation may i	include Fm r	loyer's address	11224 253rd P			
student or homen applies.		noyor o address	Number Street	<u> </u>		Number Street
						_
			Kent	WA	98030	_
			City	State		City State Zip Code
	How	long employed t	here? 17 year	'S		
					_	
Part 2: Give	Details About I	Monthly Incom	ie			
Estimate monthly inconon-filing spouse unle			n. If you have noth	ing to repo	ort for any line	, write \$0 in the space. Include your
If you or your non-filing you need more space,			er, combine the info	ormation fo	or all employer	rs for that person on the lines below. If
				For	Debtor 1	For Debtor 2 or non-filing spouse
	ess wages, salary, s). If not paid mon			2	\$3,466.67	
3. Estimate and lis	t monthly overtime	e pay.		3. + _	\$0.00	
4. Calculate gross	income. Add line	2 + line 3.		4.	\$3,466.67	

Deblo	Jose Ortiz		Case nur	nber (if kno	own) <u>17-1</u>	3890
		ı	For Debtor 1		otor 2 or ng spouse	_
	Copy line 4 here	4 .	\$3,466.67			-
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$0.00			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions. Specify:	_ 5h. +	\$0.00			
	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,466.67			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$7,114.85			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00	•		
	8f. Other government assistance that you regularly receive			-		
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	 8g.	\$0.00			
	8h. Other monthly income.					
	Specify: Rent from Girlfriend	_ ^{8h.} +	\$500.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$7,614.85			
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$11,081.52	+		= \$11,081.52
	State all other regular contributions to the expenses that you list in		e J.			
	Include contributions from an unmarried partner, members of your house friends or relatives.			ir roommat	tes, and othe	er
	Do not include any amounts already included in lines 2-10 or amounts the	at are no	ot available to pay	expenses I		
	Specify:				11. •	+\$0.00
	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilitie if it applies.				12.	\$11,081.52 Combined
12	Do you expect an increase or decrease within the year after you file	thic for	m?			monthly income
13.		1110 1011				
	_					
	Yes. Explain:					

Official Form 106l Schedule I: Your Income page 2

Debtor 1 Jose Ortiz 17-13890 Case number (if known) 8a. Attached Statement (Debtor 1) **Draws from A Plus Landscape Services LLC Gross Monthly Income:** \$9,614.85 Expense Category Amount \$2,500.00 IRS Tax Deposits Taxes **Total Monthly Expenses** \$2,500.00 **Net Monthly Income:** \$7,114.85

Official Form 106I Schedule I: Your Income page 3

Fi	II in this inforn	nation to ide	ntify y	our case:							
Г	Debtor 1	Jose			Ortiz			ck if this	s is: ended filing		
	Debitor 1	First Name	1	Middle Name	Last Na				ended ming Diement showing	postpetition	
	Debtor 2						_	chapte	er 13 expenses a		
(Spouse, if filing)	First Name	I	Middle Name	Last Na	ame		tollowii	ng date:		
ι	Jnited States Bank	ruptcy Court for	the: W	ESTERN DIS	T. OF WAS	SHINGTON		MM / D	DD / YYYY	_	
	Case number if known)	17-13890									
Off	icial Form 10)6J					_				
Sc	hedule J: Yo	our Expen	ses							12/1	
corr nam	ect information. le and case numb	If more space is er (if known).	s needed Answer	d, attach anothe every question	er sheet to	ling together, both ar this form. On the top					
Pa	art 1: Descr	ibe Your Ho	usehol	d							
1.	Is this a joint cas	se?									
	No	Debtor 2 live in	-			s for Separate Housel	hold o	f Debtor	· 2.		
2.	Do you have dependents?		☐ No			Danandantla valationakin ta		n to	Dependent's Deep depend		
	Do not list Debtor 1 and Debtor 2.	1 and	Yes. Fill out this information for each dependent			Dependent's relationship to Debtor 1 or Debtor 2		ρ το 	Dependent's age	Does dependen	
	Debiol 2.					Son			18	— <mark>∏</mark> No − √ Yes	
	Do not state the dependents' names.					Daughter			_ <u>14</u>	□ No	
						Son			7	No Yes No	
3.	Do your expense expenses of peo		<u>~</u>] No] Yes						Yes No	
	yourself and you	•	L	1 169							
Pa	art 2: Estim	ate Your On	aoina l	Monthly Exp	enses						
Esti to re	mate your expens	ses as of your b	ankrupt the ban	cy filing date u	nless you a	are using this form as a supplemental Sche		-			
	ude expenses pai h assistance and					u know the value of cial Form 106I.)			Your expen	ses	
4.	The rental or hor Include first morto	•	-	-					4.		
	If not included in	line 4:									
	4a. Real estate t	axes							4a		
	4b. Property, hor	meowner's, or re	enter's ins	surance					4b		
	4c. Home mainte	enance, repair, a	and upke	ep expenses					4c	\$100.00	
	4d. Homeowner's	s association or	condom	inium dues					4d.		

Official Form 106J

Deb	tor 1	Jose Ortiz	Case number (if known)	17-13890			
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.					
	20a.	Mortgages on other property	20a				
	20b.	Real estate taxes	20b				
	20c.	Property, homeowner's, or renter's insurance	20c				
	20d.	Maintenance, repair, and upkeep expenses	20d				
	20e.	Homeowner's association or condominium dues	20e				
21.	Other	Specify:	^{21.} +				
22.	Calcu	late your monthly expenses.					
	22a.	Add lines 4 through 21.	22a	\$3,105.00			
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b				
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$3,105.00			
23.	Calcu	late your monthly net income.					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. <u> </u>	\$11,081.52			
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$3,105.00			
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$7,976.52			
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you file	e this form?				
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?						
	<u>п</u>	No					
	Yes. Explain here: Debtor will need to get health insurance for him and his dependents in the near future once the budget allows for it. Debtor may also have to bring in another renter if necessary to make the chapter 13 plan work Rent for his girlfriend will begin in Sept 2017 - \$500/month.						

Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Jose First Name	Middle Name	Ortiz Last Name	
Debtor 2				
(Spouse, if filing)		Middle Name	Last Name	
	, ,	or the: WESTERN DI	ST. OF WASHINGTON	
Case number (if known)	17-13890			☐ Check if this is amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

1c. Copy line 63, Total of all property on Schedule A/B	P	art 1: Summarize Your Assets	
1a. Copy line 55, Total real estate, from Schedule A/B			
1b. Copy line 62, Total personal property, from Schedule A/B	1.	Schedule A/B: Property (Official Form 106A/B)	****
1c. Copy line 63, Total of all property on Schedule A/B		1a. Copy line 55, Total real estate, from Schedule A/B	\$400,716.00
Part 2: Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$538,461.00 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		1b. Copy line 62, Total personal property, from Schedule A/B	\$45,350.00
Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		1c. Copy line 63, Total of all property on Schedule A/B	\$446,066.00
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	P	art 2: Summarize Your Liabilities	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$538,461.00 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F			
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	2.		\$538,461.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F+ \$54,694.12	3.	,	\$148,000.00
5b. Copy the total claims from Part 2 (nonphority dissecured claims) from time of or Schedule E/F		3a. Copy the total dains from Fart 1 (priority disecuted dains) from the de of Schedule E/F	
Your total liabilities \$741,155.12		3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$54,694.12
		Your total liabilities	\$741,155.12
Part 3: Summarize Your Income and Expenses	В	Cummanina Vauralmaama and Furance	

Official Form 106Sum

Schedule I: Your Income (Official Form 106I)

Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22c of Schedule J.....

\$11,081.52

\$3,105.00

Debt	or 1	Jose Ortiz	Case number (if known)17-13	890
Pa	rt 4:	Answer These Questions for Administrative and Statist	tical Records	
6.	Are you	u filing for bankruptcy under Chapters 7, 11, or 13?		
	□ No ☑ Ye	 You have nothing to report on this part of the form. Check this box and ses 	submit this form to the court with yo	ur other schedules.
7.	What ki	ind of debt do you have?		
	Ľ	our debts are primarily consumer debts. Consumer debts are those "inc mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for state		a personal,
	_	our debts are not primarily consumer debts. You have nothing to report s form to the court with your other schedules.	on this part of the form. Check this	box and submit
		ne Statement of Your Current Monthly Income: Copy your total current reform 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	,	\$5,385.81
9.	Copy th	ne following special categories of claims from Part 4, line 6 of Schedu	le E/F:	
			Total claim	
	From P	art 4 on Schedule E/F, copy the following:		
	9a. Do	omestic support obligations. (Copy line 6a.)	\$0.0	<u>0</u>
	9h Ta	xes and certain other debts you owe the government (Copy line 6b.)	\$148,000.0	0

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$0.00

\$0.00

\$0.00

\$148,000.00

Debtor 1 Jose Ortiz First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptey Court for the: WESTERN DIST, OF WASHINGTON	Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: WESTERN DIST. OF WASHINGTON Case number 17-13890	Fill in this inf	ormation to id	entify your case	:	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: WESTERN DIST. OF WASHINGTON Case number 17-13890	Debtor 1		Middle Name		
	United States Bankruptcy Court for the: WESTERN DIST. OF WASHINGTON Case number 17-13890					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT a	n attorney to help you fill out bankruptcy forms?
✓ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read t true and correct.	he summary and schedules filed with this declaration and that they are
X /s/ Jose Ortiz Jose Ortiz, Debtor 1	XSignature of Debtor 2
Date 09/18/2017 MM / DD / YYYY	Date

	l in this inf	ormation to ic	lentify your case:				
	btor 1	Jose First Name	Middle Name	Ortiz Last Name			
	btor 2 bouse, if filing)	First Name	Middle Name	Last Name			
Un	ited States Bar	nkruptcy Court for	the: WESTERN DIS	T. OF WASHINGTO	<u> </u>		
	se number known)	17-13890				Check if this is an amended filing	
Be a	Statement of Financial Affairs for Individuals Filing for Bankruptcy 3e as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write rour name and case number (if known). Answer every question.						
your	name and ca	•	•	•	orm. On the top of a	ny additional pages, write	
_		se number (if kn	own). Answer every	•	·	ny additional pages, write	
_	rt 1: Giv	se number (if knowe per comment of the comment of t	own). Answer every	question.	·	ny additional pages, write	
Pa 1.	What is your Married Not marrie During the las	se number (if knowe Details About Courrent marital seed st 3 years, have years.	own). Answer every out Your Marital S tatus? you lived anywhere o	question.	ou Lived Before ve now?	ny additional pages, write	

✓ No✓ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Source	es of Your Income		mber (if known) <u>17-13890</u>	
Fill in the total amount of income ye	mployment or from operating a bus ou received from all jobs and all busi u have income that you receive toget	inesses, including par	t-time activities.	endar years?
No✓ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
rom January 1 of the current year ur ne date you filed for bankruptcy:	wages, commissions, bonuses, tips	\$12,000.00	Wages, commissions, bonuses, tips	
	Operating a business		Operating a business	
or the last calendar year:	Wages, commissions, bonuses, tips	\$60,000.00	Wages, commissions, bonuses, tips	
lanuary 1 to December 31, 2016)	Operating a business		Operating a business	
or the calendar year before that:	Wages, commissions, bonuses, tips	\$95,000.00	Wages, commissions, bonuses, tips	
lanuary 1 to December 31, 2015)	Operating a business		Operating a business	
Include income regardless of wheth unemployment; and other public be and gambling and lottery winnings. Debtor 1.	e during this year or the two previous ther that income is taxable. Examples enefit payments; pensions; rental income if you are in a joint case and you had ome from each source separately.	s of other income are ome; interest; dividen ave income that you re	ds; money collected from laveceived together, list it only constant	vsuits; royalties;

Del	otor 1	Jose Ortiz			Case number (if kno	own) <u>17-13890</u>
Р	art 3:	List Certain Payments You Ma	ide Before \	ou Filed for Ba	nkruptcy	
6.	Are eithe	er Debtor 1's or Debtor 2's debts prima	arily consume	debts?		
	□ No.	Neither Debtor 1 nor Debtor 2 has princurred by an individual primarily for	-			ed in 11 U.S.C. § 101(8) as
		During the 90 days before you filed for	bankruptcy, di	d you pay any credit	or a total of \$6,425	* or more?
		☐ No. Go to line 7.				
		Yes. List below each creditor to who total amount you paid that crechild support and alimony. A	editor. Do not i	nclude payments for	domestic support of	obligations, such as
		* Subject to adjustment on 4/01/19 and	d every 3 years	after that for cases	filed on or after the	date of adjustment.
	✓ Yes.	Debtor 1 or Debtor 2 or both have pr	imarily consu	mer debts.		
		During the 90 days before you filed for	bankruptcy, di	d you pay any credit	or a total of \$600 or	r more?
		No. Go to line 7.				
		Yes. List below each creditor to who creditor. Do not include payment Also, do not include payment	nents for dome	stic support obligation	ons, such as child s	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
_		or & Industries	_	\$3,200.00	_	Mortgage
Cre	ditor's name		\$1400 for	June, July and A	ıg	Car
Nun	nber Stre	et	_			☐ Credit card ☐ Loan repayment
			_			Suppliers or vendors
						☐ Other
City		State ZIP Code	_			<u> </u>
7.	Insiders corporati agent, in such as	year before you filed for bankruptcy, of include your relatives; any general partner ons of which you are an officer, director, cluding one for a business you operate a child support and alimony. List all payments to an insider.	ers; relatives of person in cont	f any general partne rol, or owner of 20%	rs; partnerships of vor more of their vot	which you are a general partner; ing securities; and any managing

Debtor 1 Jose Ortiz				Case number (if know	n) 17-13890	
8. Within 1 year before you benefited an insider?	u filed for bankruptcy,	did you make an	y payments or tra	ansfer any property	on account of a	debt that
Include payments on deb	ts guaranteed or cosign	ed by an insider.				
□ No						
ш	ts that benefited an insid	der.				
		Dates of payment	Total amount paid	Amount you still owe	Reason for this	
Natalie Ortiz			\$7,000.00	\$0.00	2008 infinity	Q50 -
Insider's name		Part of Divo	rce Decree - pai	d off the car loan	transferred to	wife as part
Number Street			fer so that she		of divorce pro	oceeding
. Tullion Gudot					8/2016	
		_				
City	State ZIP Code	_				
Ony .	Ciaio Zii Codo					
Part 4: Identify Leg	al Actions, Repos	sessions and	l Foreclosures	:		
	•	•				
 Within 1 year before you List all such matters, inclumodifications, and contra No 	uding personal injury ca		-		-	_
Yes. Fill in the detail	S.					
Case title	Nature of the	case	Court	or agency	St	atus of the case
Capital One Bank v. Jose		Collections		County Superior		
Ortiz		ntered 12/6/20	13 Court N	Name		— Pending
			401 F Numbe	Fourth Avenue N er Street		On appeal
Case number 13-2-23006-2	KNT		Roon			Concluded
<u></u>	<u> </u>					
			Kent City		/A 98032 tate ZIP Code	
			City	31	ale ZIF Code	
Case title Midland Funding v Jose (Nature of the Ortiz Judgment E		Court	or agency	St	atus of the case
	oungon		Court N	Name		— Pending
						On appeal
Case number			Numbe	er Street		Concluded
						V considuou
			City	St	tate ZIP Code	
Case title	Nature of the	0250	Court	or agency	64	atus of the case
Jose Ortiz v Natalie Ortiz		case ceeding - cond		County Superior		
JUSO OTTIZ V HUTAIIG OTTIZ	on Feb 3, 2	_	Court N		Juit Of HA	— Pending
						On appeal
Case number 46 2 06454 0			Numbe	er Street		☐ Concluded
Case number <u>16-3-06451-9</u>	<u>' </u>					VI Concluded
			Seatt		/A	
			City	St	tate ZIP Code	

Official Form 107

Deb	otor 1	Jose Ortiz		Case number (if known)	17-13890		
Cas	e title		Nature of the case	Court or agency		Sta	tus of	the case
Dis	cover I	Bank v Ortiz	Collection Case - \$13,902.53	King County Sup	erior Co	urt - Kent	_	Dandina
			Judgment entered	Court Name			- Ц	Pending
				PO Box 6103			_ 🗆	On appeal
Cas	e numbe	er 132-148064		Number Street			V	Concluded
		102 1 1000 1	_				_ 🗷	
				Carol Stream	IL State	60197 ZIP Code	_	
				City	State	ZIP Code		
10.	seized Check	1 year before you filed for an interest of the series of t	or bankruptcy, was any of your prope	erty repossessed, foreclo	sed, garn	ished, attached	d,	
	☐ Ye	s. Fill in the information be	elow.					
11.		•	for bankruptcy, did any creditor, incl r refuse to make a payment because	-	institutio	n, set off any		
	✓ No □ Ye	s. Fill in the details.						
12.	2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
	✓ No							
P	art 5:	List Certain Gifts	and Contributions					
13.	Within	2 years before you filed	for bankruptcy, did you give any gifts	with a total value of mo	re than \$6	00 per person	?	
	☑ No	s. Fill in the details for each	ch gift.					
14.		2 years before you filed charity?	for bankruptcy, did you give any gifts	s or contributions with a	total value	of more than	\$600	
	✓ No	s. Fill in the details for each	ch gift or contribution.					
Р	art 6:	List Certain Losse	es					
15.		1 year before you filed fo	or bankruptcy or since you filed for b	ankruptcy, did you lose a	anything b	ecause of the	t, fire,	
	✓ No □ Ye	s. Fill in the details.						

Debtor 1	Jose Ortiz		Ca	ase number (if k	nown) 17-13890	
Part 7:	List Certain P	ayments or	Transfers			
anyone Include a	you consulted abo	out seeking ba	ptcy, did you or anyone else acting on yonkruptcy or preparing a bankruptcy petit oreparers, or credit counseling agencies for	ion?		•
	raaff & Mccorm	ick, PS	Description and value of any property \$2000 for atty fees and \$310 for fili into trust.		Date payment or transfer was made	Amount of payment
1833 N 105	th St				7/7/2017	\$2,000.00
Number Stre Ste 203	et		 \$787.50 paid from trust to Henry D McCormick on 9/1/2017 for fees ar earned. 		8/31/2017	\$610.00
Seattle City	WA State	98133 ZIP Code	_			
Email or website	e address ade the Payment, if Not	: You	_			
18. Within 2 property	transferred in the coth outright transfe	e ordinary coul ers and transfer	uptcy, did you sell, trade, or otherwise tr rse of your business or financial affairs? s made as security (such as granting of a so have already listed on this statement.			
☐ No ☑ Yes.	. Fill in the details.		Description and value of any	Describe any p	operty or payments	Date transfer
Jose Ortiz Person Who Received Transfer 11224 SE 253rd					ts paid in exchange	
			Quit Claim Deed Recorded as N/A result of Divorce Decree			
Number Stre	et		-			
Kent City	WA State	98030 ZIP Code	-			
19. Within 1 you are ☑ No		ı filed for bank	cruptcy, did you transfer any property to a called asset-protection devices.)	a self-settled tr	ust or similar device	e of which

Official Form 107

Debtor 1	Jose Ortiz		Case number (if	known) 17-13890	
Part 8:	List Certain Financial Acc	ounts, Instruments, Sa	fe Deposit Boxes, an	d Storage Units	
	1 year before you filed for bankrup t, closed, sold, moved, or transferre	•	ounts or instruments held	in your name, or for	your
	e checking, savings, money market, o s, pension funds, cooperatives, assoc	·	•	in banks, credit union	s, brokerage
□ No ☑ Ye	os. Fill in the details.				
Rank of A	merica (Aplus Property Svcs in	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	ncial Institution	xxxx	✓ Checking	October 2016	\$0.00
Number St	treet		☐ Savings ☐ Money market ☐ Brokerage		
Kent	WA 7/D Oo de		Other		
City Bank of A	State ZIP Code merica (Aplus Property Svc inc	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	ncial Institution	xxxx	Checking	Oct 2016	\$0.00
Number St	treet		Savings Money market Brokerage		
Kent	WA		Other		
-	State ZIP Code u now have, or did you have within curities, cash, or other valuables?	1 year before you filed for b	ankruptcy, any safe depo	sit box or other depo	esitory
☑ No □ Ye	es. Fill in the details.				
☑ No	you stored property in a storage units es. Fill in the details.	it or place other than your h	ome within 1 year before	you filed for bankrup	tcy?

Deb	otor 1	Jose Ortiz	Case number (if known) 17-13890
P	art 9:	Identify Property You Hold or Control for Someone Else	9
23.	•	hold or control any property that someone else owns? Include any p in trust for someone.	roperty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
P	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
I	hazardou	nental law means any federal, state, or local statute or regulation conc is or toxic substance, wastes, or material into the air, land, soil, surfac y statutes or regulations controlling the cleanup of these substances,	e water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environmen or used to own, operate, or utilize it, including disposal sites.	tal law, whether you now own, operate, or
		us material means anything an environmental law defines as a hazard e, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of	when they occurred.
24.	Has any law?	y governmental unit notified you that you may be liable or potentially l	able under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.	
25.	☑ No	ou notified any governmental unit of any release of hazardous materia . Fill in the details.	?
26.	Have you	ou been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and
	✓ No ☐ Yes	. Fill in the details.	

Part 11 -	Give Details	About Your	Rusinass or	Connections to	Any Rusings
au to to to	GIVE DELAIIS	ADOUL I OUI	Dusiliess vi	COINICUIONS IO	Ally Dubiliess

27. Within 4 years before you filed for ba business?	ankruptcy, did you own a business or have an	y of the following connections to any
A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the	e voting or equity securities of a corporation	
A Plus Property Services, Inc. Business Name 11224 SE 253rd PI Number Street Kent WA 98030 City State ZIP Code	Describe the nature of the business Landscaping Business UBI#602-816-188 Name of accountant or bookkeeper Capital Accounting & Tax Svcs Inc.	Employer Identification number Do not include Social Security number or ITIN. EIN: 2 6 - 2 2 3 5 2 3 9 Dates business existed From 3/22/2008 To 12/1/2016
Sparkels Shine & Soul Business Name 23927 60th Ave S Apt H201 Number Street Kent WA 98032 City State ZIP Code	Describe the nature of the business Sole Proprietor - Jewelry Reseller for Ex Wife Name of accountant or bookkeeper Capital Accounting & Tax Svcs Inc.	Employer Identification number Do not include Social Security number or ITIN. EIN: 2 6 - 2 2 3 5 2 3 9 Dates business existed From 2/1/2016 To 12/2016
A Plus Landscaping Business Name Number Street	Describe the nature of the business UBI# Name of accountant or bookkeeper Capital Accounting & Tax Svcs Inc.	Employer Identification number Do not include Social Security number or ITIN. EIN: 2 6 - 2 2 3 5 2 3 9 Dates business existed From To
Zity State ZIP Code 28. Within 2 years before you filed for ba all financial institutions, creditors, or V No Yes. Fill in the details below.	ankruptcy, did you give a financial statement t r other parties.	to anyone about your business? Include

Debtor 1	or 1 Jose Ortiz		Case number (if known)17-13890
Part 12:	Sign Below		
that answer property by	s are true and correct. I un	derstand that making a false statement, c bankruptcy case can result in fines up to	nts, and I declare under penalty of perjury oncealing property, or obtaining money or \$250,000, or imprisonment for up to 20 years,
X /s/ Jose	Ortiz	X	
Jose Orti	z, Debtor 1	Signature of Debtor 2	
Date	09/18/2017	Date	
Did you atta	ch additional pages to You	r Statement of Financial Affairs for Indivic	luals Filing for Bankruptcy (Official Form 107)?
☑ No			
Yes			
Did you pay	or agree to pay someone w	who is not an attorney to help you fill out	pankruptcy forms?
√ No			
	me of person		Attach the Bankruptcy Petition Preparer's Notice,

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF WASHINGTON SEATTLE DIVISION

n re Jose Ortiz	Case No. <u>17-13890</u>
	Chapter <u>13</u>
DISCLOSURE OF COMPE	NSATION OF ATTORNEY FOR DEBTOR
that compensation paid to me within one year before	2016(b), I certify that I am the attorney for the above named debtor(s) and a the filing of the petition in bankruptcy, or agreed to be paid to me, for a debtor(s) in contemplation of or in connection with the bankruptcy case
For legal services, I have agreed to accept	\$4,500.00
Prior to the filing of this statement I have received	
Balance Due	
2. The source of the compensation paid to me was: ☑ Debtor ☐ Other (speci	fy)
3. The source of compensation to be paid to me is:	
☑ Debtor ☐ Other (speci	fy)
 I have not agreed to share the above-disclosed associates of my law firm. 	compensation with any other person unless they are members and
	mpensation with another person or persons who are not members or ment, together with a list of the names of the people sharing in the
5. In return for the above-disclosed fee, I have agreed	to render legal service for all aspects of the bankruptcy case, including:
 a. Analysis of the debtor's financial situation, and rebankruptcy; 	endering advice to the debtor in determining whether to file a petition in
b. Preparation and filing of any petition, schedules,	statements of affairs and plan which may be required;
c. Representation of the debtor at the meeting of cr	editors and confirmation hearing, and any adjourned hearings thereof;

$D \cap C \cap C$	/Farm	2020	(12/15)
n/U.SU	(– () () ()	70.5011	11//151

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

> 09/18/2017 /s/ Christina L. Henry

Christina L. Henry Date

Henry, DeGraaff & McCormick, PS

1833 N 105th St Ste 203

Seattle, WA 98133

Phone: (206) 330-0595 / Fax: (206) 400-7609

Bar No. 31273

/s/ Jose Ortiz

Jose Ortiz

F	ill in this inf	ormation to ider	tify your case:			Check as	directed in lines 1	7 and 21:
D	ebtor 1	Jose First Name	Middle Name	Ortiz Last Name		According to Statement:	the calculations require	ed by this
	ebtor 2		Middle Hame	Lactivanio			ble income is not deter	mined
(5	Spouse, if filing)	First Name	Middle Name	Last Name		1 1	1 U.S.C. § 1325(b)(3). ble income is determine	ed
U	Inited States Ba	nkruptcy Court for the	: WESTERN DIST	OF WASHINGT	ON		1 U.S.C. § 1325(b)(3).	ea
	ase number	17-13890				3. The con	nmitment period is 3 year	ars.
(i	f known)					4. The con	nmitment period is 5 year	ars.
<u>O</u> 1	fficial Form	122C-1				☐ Check if t	his is an amended filing	J
		Statement of tion of Comm			ome			12/15
inf	ormation applie	space is needed, at es. On the top of an Iculate Your Ave	y additional pages, v	write your name a				
1.	What is your	marital and filing sta	atus? Check one onl	y.				
	Not mari	ried. Fill out Column	A, lines 2-11.					
	_	Fill out both Column	s A and B, lines 2-11					
	bankruptcy c August 31. If in the result.	ase. 11 U.S.C. § 10 the amount of your m	1(10A). For example conthly income varied come amount more the	e, if you are filing on I during the 6 mont han once. For exa	n Septemb hs, add the mple, if bo	er 15, the 6-mont e income for all 6 th spouses own t	nonths before you file th period would be Marc months and divide the he same rental property e space.	ch 1 through total by 6. Fill
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	_	rages, salary, tips, b roll deductions).	onuses, overtime, a	nd commissions		\$4,200.00		
3.	Alimony and	maintenance payme	ents. Do not include	payments from a s	pouse.	\$0.00		
4.	expenses of y regular contrib your depende	from any source wh you or your dependent outions from an unma nts, parents, and room out include payments	ents, including child rried partner, membe mmates. Do not inclu	I support. Include ers of your househo	•	\$0.00		
5.	Net income fi	rom operating a bus	iness, profession, o	or farm				
			Debtor 1	Debtor 2				
	Gross receipts deductions)	s (before all	\$1,602.48					
	Ordinary and expenses	necessary operating	\$416.67		Сору			
	Net monthly ir profession, or	ncome from a busines farm	ss, \$1,185.81		here →	\$1,185.81		

Official Form 122C-1

Gross receipts (before all deductions) Ordinary and necessary operating - \$0.00 - expenses Ordinary and necessary operating - \$0.00 - expenses Net monthly income from rental or \$0.00 here \$0.00 Stempthylincome from rental or should be such as the second of the real property Interest, dividends, and royalties Sumphyloryment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list if here	Deb	or 1	Jose Ortiz			c	ase number (if k	nown) 17-13890	
Orbinary and necessary operating — \$0.00 — experieses Ordinary and necessary operating — \$0.00 — experieses Net monthly income from rental or other real property Interest, dividends, and royalties Sumplyoyment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:								Debtor 2 or	
Gross receipts (before all deductions) Ordinary and necessary operating — \$0.00 — expenses Net monthly income from rental or \$0.00 here → \$0.00 deter real property Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:	6.	Net	income from rental and other re	eal property					
Ordinary and necessary operating = \$0.00 expenses Net monthly income from rental or other real property 7. Interest, dividends, and royalties \$0.00 8. Unemployment compensation \$0.00 9. Pension or retirement income. Do not include any amount received was a benefit under the Social Security Act. Instead, list if here:				Debtor 1	Debtor 2				
Ordinary and necessary operating = \$0.00 - expenses Net monthly income from rental or \$0.00 here \$30.00 here \$30.			• •	\$0.00					
Net monthly income from rental or other and property Interest, dividends, and royalties 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you. For you. So.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act. 11. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Social Security Act. Social Security Act. Social Security Act. \$5,385.81 **Total average monthly income from line 11. Social security Act. Social average monthly income from line 11. Soci		Ordi	inary and necessary operating -	\$0.00		Conv			
8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you. S0.00 For your spouse		Net	monthly income from rental or	\$0.00			\$0.00		
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:	7.	Inte	rest, dividends, and royalties				\$0.00		
benefit under the Social Security Act. Instead, list it here: For you	8.	Une	employment compensation				\$0.00		
Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. \$5,385.81 +									
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. \$5,385 Total average monthly income from line 11. \$5,385 Calculate the marital adjustment. Check one: You are not married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.		F	For you		\$0.	00			
was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. \$5,385 Total average monthly income from line 11. \$5,385 Total average monthly income from line 11. \$5,385 Total average monthly income from line 11. \$1. Calculate the marital adjustment. Check one: You are not married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.			, ,		-				
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. \$5,385 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total	9.				ount received that	İ	\$0.00		
Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11	11.	Tota Calc	al amounts from separate pages, culate your total average month	if any. Iy income. nn.	В.	 - [\$5,385.81	+=	Total average
12. Copy your total average monthly income from line 11. \$5,385 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$0.00 Copy here → \$0	D	w4 0	Determine Hew to M	anning Verry D	aduationa fran	n Income			monthly income
13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total									\$5,385.81
You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total									
			You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for excl necessary, list additional adjustr	e is filing with you. e is not filing with y listed in line 11, Co as payment of the uding this income a nents on a separat	rou. Dlumn B, that was spouse's tax liabi and the amount of	lity or the s	pouse's support	of someone other	
			Total				\$0.00 Con	v here	_ \$0.00
14. Your current monthly income. Subtract the total in line 13 from line 12. \$5,385								, 7	\$5,385.81

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Deb	tor 1	Jo	ose Ortiz	Case number (if known) 17-13890		
15.	Calcu	ulate	your current monthly income for the year.	Follow these steps:		
	15a.	Cop	by line 14 here 😝			\$5,385.81
		Mul	tiply line 15a by 12 (the number of months in a	a year).	X	12
	15b.	The	result is your current monthly income for the	year for this part of the form	\$(64,629.72
16.	Calcı	ulate	the median family income that applies to yo	ou. Follow these steps:		
	16a.	Fill	in the state in which you live.	Washington		
	16b.	Fill	in the number of people in your household.	4		
	16c.	Fill	in the median family income for your state and	d size of household	\$!	92,727.00
		To f	•	ts, go online using the link specified in the separate		
17.	How	do th	ne lines compare?			
	17a.	$\overline{\mathbf{V}}$	·	n the top of page 1 of this form, check box 1, <i>Disposable income is</i> . Do NOT fill out Calculation of Your Disposable Income (Official For		
	17b.			of page 1 of this form, check box 2, <i>Disposable income is determined</i> I out Calculation of Your Disposable Income (Official Form 122Country income from line 14 above.		er
P	art 3:	•	Calculate Your Commitment Period	I Under 11 U.S.C. § 1325(b)(4)		
18.	Сору	you	r total average monthly income from line 11	1		\$5,385.81
19.	that c	calcul		e married, your spouse is not filing with you, and you contend § 1325(b)(4) allows you to deduct part of your spouse's		
	19a.	If th	e marital adjustment does not apply, fill in 0 o	n line 19a		\$0.00
	19b.	Sub	otract line 19a from line 18.			\$5,385.81
20.	Calcu	ulate	your current monthly income for the year.	Follow these steps:		
	20a.	Cop	by line 19b			\$5,385.81
		Mul	tiply by 12 (the number of months in a year).		X	12
	20b.	The	result is your current monthly income for the	year for this part of the form.	\$6	64,629.72
	20c.	Cop	by the median family income for your state and	d size of household from line 16c.	\$9	92,727.00
21.	How	do th	ne lines compare?			
			20b is less than line 20c. Unless otherwise on a box 3, <i>The commitment period is 3 years</i> . G	dered by the court, on the top of page 1 of this form, to to Part 4.		
	_		20b is more than or equal to line 20c. Unless sform, check box 4. <i>The commitment period is</i>	otherwise ordered by the court, on the top of page 1		

Debtor 1	Jose Ortiz	Case number (if known) 17-13890
Part 4:	Sign Below	
By sig	ning here, under penalty of perjury I declare	that the information on this statement and in any attachments is true and correct.
X /s/	Jose Ortiz	X
Jos	se Ortiz, Debtor 1	Signature of Debtor 2
Da	ite 9/18/2017	Date
	MM / DD / YYYY	MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Current Monthly Income Calculation Details

In re: Jose Ortiz Case Number: 17-13890

Chapter: 13

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if	Description (if available)					
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
<u>Debtor</u>	Salary from A	Aplus \$0.00	\$0.00	\$0.00	\$0.00	\$3,200.00	\$533.33
<u>Debtor</u>	Paycheck fro	m BJs Cons	truction \$4,000.00	\$4,000.00	\$4.000.00	\$0.00	\$3,666.67

5. Net income from operating a business, profession or farm.

Debtor or Spouse's Income	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
Debtor	Draws from	Aplus Lands	capes Svcs				
Gross receipts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9,614.85	\$1,602.48
Ordinary/necessary business expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,500.00	\$416.67
Business income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,114.85	\$1,185.81

Underlying Allowances (as of 09/01/2017)

In re: Jose Ortiz

Case Number: 17-13890 Chapter: 13

Median Income Information				
State of Residence	Washington			
Household Size	4			
Median Income per Census Bureau Data	\$92,727.00			

National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous				
Region	US			
Family Size	4			
Gross Monthly Income	\$5,385.81			
Income Level	Not Applicable			
Food	\$845.00			
Housekeeping Supplies	\$65.00			
Apparel and Services	\$293.00			
Personal Care Products and Services	\$77.00			
Miscellaneous	\$370.00			
Additional Allowance for Family Size Greater Than 4	\$0.00			
Total	\$1,650.00			

National Standards: Health Care (only applies to cases filed on or after 1/1/08)						
Household members under 65 years of age						
Allowance per member \$49.00						
Number of members	0					
Subtotal	\$0.00					
Household members 65 years of age or older	Household members 65 years of age or older					
Allowance per member	\$117.00					
Number of members	0					
Subtotal \$0.00						
Total \$0.00						

Local Standards: Housing and Utilities			
State Name	Washington		
County or City Name	King County		
Family Size	Family of 4		
Non-Mortgage Expenses	\$678.00		
Mortgage/Rent Expense Allowance	\$2,218.00		
Minus Average Monthly Payment for Debts Secured by Home	\$2,716.00		
Equals Net Mortgage/Rental Expense	\$0.00		
Housing and Utilities Adjustment	\$0.00		

Underlying Allowances (as of 09/01/2017)

In re: **Jose Ortiz**Case Number: **17-13890**Chapter: **13**

Loc	cal Standards: Transportat	ion; Vehicle Operati	ion/Public Transportation	
Transportation Region		Seattle	Seattle	
Number of Vehicles Operated		2 or more	2 or more	
Allowance		\$438.00	\$438.00	
Loc	al Standards: Transportation	on; Additional Publi	c Transportation Expense	
Transportation Region		Seattle		
Allowance (if entitled)		\$189.00	\$189.00	
Amount Claimed		\$0.00	\$0.00	
	Local Standards: Trans	sportation; Ownersl	nip/Lease Expense	
Transportation Region		Seattle	Seattle	
Number of Vehicles with Ownership/Lease Expense		0	0	
First Car		r	Second Car	
Allowance				
Minus Average Monthly Payment for Debts Secured by Vehicle				
Equals Net Ownership / Lease Expense				